



Subst. for form 1449/PTO <b>SUPPLEMENTAL          INFORMATION DISCLOSURE STATEMENT BY          APPLICANT</b> <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	<b>10/588,098</b>
				371 Filing Date	<b>2006-12-18</b>
				First Named Inventor	<b>W. Dennis Slafer</b>
				Art Unit	
				Examiner Name	
Sheet	<b>2</b>	Of	<b>3</b>	Docket Number	<b>059380-0050 (MCMK-004)</b>
<b>OTHER ART (Including Author, Title, Date, Pertinent Pages, Etc.)</b>					
EXAMINER'S INITIALS	CITE NO.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			
/J.R./		Supplementary European Search Report for related EP Application No.: EP 05 71 1734, 2 PP			
EXAMINER /Joshel Rivera/			DATE CONSIDERED 01/14/2009		

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.  
 1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.